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PTO/SB/82 (01-06)

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Application Number	10/772691
Filing Date	02/05/2004
First Named Inventor	Joan Mitchell
Art Unit	2624
Examiner Name	SHERALI,ISHRAT
Attorney Docket Number	BLD920000064US2

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	Lynne Anderson		
Date	October 15, 2007	Telephone	(703) 299-1455

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

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